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ABSTRACT

A review of the literature and a detailed analysis of five specific studies on placement team functioning is presented. Among findings are a strong positive relation between staff role and participation (school psychologists were ranked highest on both variables while regular education teachers were ranked lowest) and a very powerful set of role expectations calling for more participation from school psychologists and special education teachers and less from regular education teachers and parents. Future implications for school psychologists are noted, including training in underlying theories of teams, the nature of decisionmaking processes, and the reaction of team members to the team experience. The importance of adding to the empirical study of teams is stressed. (CL)

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# Investigation of Role Influence in Child Study Teams

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Significant organizational changes in the methods used to place children in special education are required as a result of the passage of Public Law 94-142, The Education for All Handicapped Children Act of 1975.

Concern for students' and parents' rights to due process under the law and the accountability movement in education have resulted in the creation of specific committees charged with the responsibility for determining a child's eligibility for special education placement or service. These education planning committees are known by various names in different states (Child Study Team, Educational Planning Team, Multidisciplinary Team, IEP Team, Assessment Team, School Appraisal Team) but are generally responsible for determining and reviewing eligibility for special education, recommending special education programs or services, establishing instructional goals, and identifying outcomes expected as a result of the special education service.

Since personnel from various professional disciplines are involved, representing specific areas of expertise, it would be expected that certain roles would contribute differently to the decisions reached at these educational planning committee meetings.

Considerable controversy and debate continues regarding the role influence of members in the Child Study Team (clinical, instructional, administrative, and parental).

The current literature reveals the need for adequate information about the duties and responsibilities of a role for the person fulfilling that role. Trailor (1982).

Matuszek and Oakland (1979) state that the primary role for subdoctoral school psychologists is to determine children's eligibility for special classes. They are perceived as being expert primarily - if not exclusively - in the administration and interpretation of tests.

Disquieting feelings and dissatisfaction often accompany this rather narrow role definition. For psychologists, these include an awareness that a restricted and limited set of child characteristics typically are observed, opportunities to confer with teachers and other significant adults who know the child more extensively are limited, and the number of cases needed to be processed is never ending. Teachers often express displeasure with the quality and relevance of the reports, with the insufficiency of the psychologist's data-gathering techniques, with the isolated nature of the psychologist's work and with the paucity of educationally relevant information.

Senft and Snider (1980) conducted a study to assess the values which elementary school principals nationwide place upon the psychologist's role to their schools and the desire these principals have to maintain or change the school psychological

services offered. The findings shows 66.2% of the elementary school principals indicated that school psychological services should be continued as they are.

Dean (1980) compared experienced and preservice elementary school teacher's perceptions of the school psychologist. Thirty-two experienced teachers were matched with a like number of second semester juniors in training. A questionnaire asked each respondent to (a) rank a number of school personnel on their importance, (b) assign a number of referral problems to professionals best equipped to handle them, and, (c) to rate the school psychologist's functioning on eleven dimensions. The analysis shows that the experienced and preservice teachers agreed about the importance of the school psychologist and the appropriateness of referral problems. Analysis of ratings revealed that experienced teachers had a more negative opinion of the school psychologist's functioning when compared to their novice counterparts.

Watkins and Brown (1980) investigated teacher's attitudes toward and perceptions of the teacher's role and direct implications toward school psychologists. The findings indicate that within the teaching hierarchy, prestige tends to proceed up the grades, with nursery school teachers ranking lowest and college professors highest. Further, teachers often perceive specialists and administrators as having higher status than classroom teachers.

Since it is generally agreed that attitudes influence behavior, the school psychologist must be alert to the attitudes of teachers toward teacher sub-groups.

No specific mandate under Public Law 94-142 or its Regulations requires teachers as members of evaluation teams, except in cases of suspected learning disability. Kabler (1980) concurs that teacher data on the child's performance may be incongruent with data provided by other team members. However, without teacher involvement, important data may be neglected since it is not easily available to other education team members.

Kabler's (1980) suggestions for appropriate teacher participation in the Child Study Team is outlined in APPENDIX A.

Parental involvement in the education of handicapped children has been mandated with the passage of P.L. 94-142, The Education for All Handicapped Children Act.

Based on the results of an investigation by Curry (1980) there is a need for systematically training parents to fulfill their roles and responsibilities associated with involvement as full partners in the Child Study Team. A first step in developing a foundation for effective parent involvement is to assist parents in the clarification of their perspectives on the meaning of parent involvement. As a part of this process, parents should explore the various facets of home-school development and inquire into

the kinds of activities existing programs have used successfully. Parents who take part in the Child Study Team need to assess their readiness for making involvement meaningful and effective. Swick and Duff (1981).

Because assessment is central to so many critical special education decisions, it is essential that parents be knowledgeable and informed about it. Bennett (1982) lists eleven questions parents should ask about the evaluation of their handicapped children. (See APPENDIX B). The questions and their supporting comments have been drawn from federal, state, and case law governing special education assessment, from professional standards for the use of tests developed by the American Psychological Association, the National Council on Measurement in Education, and the American Educational Research Association (Standards for Educational and Psychological Tests, 1974), and from current literature about what constitutes good practice in special education pupil evaluation.

Many states have replaced a single individual or "gatekeeper", usually the school psychologist, with a committee for making special education placement and programming decisions. Pryzwansky (1981). A team or group of persons, instead of one or two professionals, is expected to be involved in both the assessment of disabilities and the planning of schooling for the exceptional child. Specifically, Section 121 a. 532 (e) of Public Law 94-142 states, "The evaluation is made by a multidisciplinary team or group of persons, including at least one teacher, or other specialist, with knowledge in the

area of suspected disability." Section 121 a 533 (3) further requires that each public agency shall "insure that the placement decision is made by a group of persons, including persons knowledgeable about the child, the meaning of the evaluation data, and the placement opinions."

A review of studies involving the role influence of these designated persons follows.

Yoshida, Roland K., Fenton, Kathleen S., Maxwell, James P., Kaufman, Martin J. "Group Decision Making in the Planning Team Process: Myth or Reality?" Journal of School Psychology.

Yoshida and Kaufman are Education Program Specialists with the Bureau of Education for the Handicapped, U.S. Office of Education, Division of Assistance to States. Fenton and Maxwell are also Education Program Specialists with the U.S. Office of Education, Division of Innovation and Development.

The purpose of this study was to determine: (a) whether placement committee members of different professions differ in their self-ratings of the extent to which they participate in the various tasks of a placement meeting, (b) whether committee members differ in the degree to which they are satisfied that their presence in the Planning Team is necessary and the degree to which they were satisfied with the committee process, and (c) the magnitude of the relationship between participation and satisfaction.

Hypothesis: the power relationships and role expections established prior to the Planning Team meeting carry over into the meeting and yield a significant difference in influencing committee interaction and decision making.

The sampling design was based on data which showed that most initial referrals occurred at the elementary level. In order to increase the probability of securing an adequate number of initial referrals across all grade levels, all public seniors (n=165) and junior (n=136) high schools and a random sample of one third of the elementary schools (n=121) in Connecticut were the initial pool selected to participate in the study. It was then ascertained which schools had Planning Teams that had determined initial special class eligibility and programming for educable mentally retarded, learning disabled, or socially and emotionally maladjusted students during September 1975 to January 1976.

More than one half of the schools (53.6% senior high; 57.0% junior high; 52.9% elementary) agreed to participate and had Planning Teams which had placed these types of students. From each school's list of placed handicapped students, one student was randomly selected. The Planning Team members for each selected handicapped student were identified and a questionnaire was mailed to each of the school staff members on the team. Of the 1,536 questionnaires that were mailed to school personnel from 230 Planning Teams, 1,474 were returned, representing a return rate of 96.2%. Since some school personnel served on more than one student's Planning Team, duplicate responses were obtained. These were eliminated from the sample. Thus, the final sample consisted of 1,344 subjects from 230 Planning Teams.

The Planning Team members were categorized as follows:

| | |
|---|---|
| School Psychologist | n=124 |
| School Social Worker | n=98 |
| School Counselor | n=203 |
| Central Administration Personnel | n=49 |
| Principals | n=232 |
| Speech and Hearing Clinician | n=44 |
| Medical Personnel | n=74 |
| Reading Consultant | n=66 |
| Special Education Teacher | n=243 |
| Regular Education Teacher | n=211 |

The questionnaire of seven items asked Planning Team members to rate how much they participated during a Planning Team meeting and two items concerned their satisfaction with their presence on the Planning Team and with the Planning Team process itself. (The specific items used in the questionnaire are listed in APPENDIX C). These nine items were selected from a discussion of decision-making activities by Vroom (1969) and from a list of Planning Team functions identified by the Connecticut State Department of Education personnel and a sample of local district administrators and support personnel. For each item, a Likert-type response scale was numbered from 1 through 5, where 1 indicated the highest rating (highly agree); 3, the middle rating (no opinion); and 5, the lowest rating (strongly disagree).

The hypothesized relationships were tested using two forms of the general linear model: multiple analysis of variance (MANOVA) and canonical correlation. MANOVA tested the hypothesized

relationship between roles and: (a) all participation items, (b) the two factored sets of participation variables - Specific Planning Team Tasks and Decision Making Climate, and (c) the two satisfaction items. To identify which roles differed in terms of participation and satisfaction, t-tests were performed between the role means and the total mean for each participation and satisfaction variable. Canonical correlation yield an eta-square ($n^2$) which measures the degree of relationship between two sets of variables when there is more than one uncorrelated relationship between the sets. An alpha level of .05 was adopted to test the significance of each statistical hypothesis.

The relationship between Planning Team members' roles and participation was strongly positive ($n^2$=38%) with Specific Planning Team Tasks accounting for 35% of the variance in role and only 6% attributable to Decision-Making Climate. However, the relationship between role and the two satisfaction variables was weak ($n^2$=9%). The seven participation items were highly positively related to the two satisfaction variables ($n^2$=42%), with Specific Planning Team Tasks accounting for 40% and Decision-Making for 15%.

Thus, Planning Team members' roles are positively related to participation, which in turn is positively related to satisfaction, however, Planning Team members' roles are not highly related to satisfaction.

The MANOVA for role was significant for participation ($p < .001$) and satisfaction ($p < .001$).

The results of this study clearly show that Planning Team members of different professions differ in the magnitude of self-perceived participation during the Planning Team meeting, especially in five activities concerning Specific Planning Team Task participation (contributing and interpreting information, proposing and evaluating alternatives, and finalizing decisions). Appraisal personnel (school psychologist, school social worker, and school counselor) and administrators generally have higher participation scores than dc medical personnel or special education teachers.

The regular education teachers generally perceived themselves as low in participation and satisfaction with the Planning Team process. The school psychologists, and to a lesser extent the special education teachers, perceived themselves as high in participation and satisfaction.

This study must be considered exploratory because of the limitation imposed by the use of self-ratings rather than direct observation of participation and satisfaction. Subsequent research using behavioral indices should be conducted to provide cross validation of these results. Nevertheless, these findings raise concerns that the expectation that committees will improve education decision making for handicapped children may be more myth than reality.

Gilliam, James E. "Contributions and Status Rankings of Educational Planning Committee Participants." Exceptional Children.

Gilliam is Assistant Professor, Department of Special Education, The University of Texas, Austin.

The purpose of this study was to determine who contributes most to the decisions reached and the rank order of the personnel in terms of their importance to the educational planning committee process.

Hypothesis: rank order correlations of individual participants' ratings of actual contributions yield a significant difference at the .01 level.

A survey was made of 130 participants at 27 educational planning committee meetings to determine the status ranking of the committee roles and the amount of contribution each role demonstrated. The study was conducted in three medium sized school districts (ADA between 14,000 and 20,000 students) in southeastern Michigan.

Perceptions of status were obtained on a questionnaire completed prior to the meeting which required the participants to rank order the 15 roles most often represented in educational planning committees according to their importance to the planning process. After the meeting, participants evaluated their actual contributions and the contributions of other participants to five functions: diagnosis, planning, placement, implementation, and due process.

The correlations of how the roles were ranked in importance with actual ranks they received for their contribution were not significant (Spearman rho correlation coefficient=.21). Inspection of the data reveals that parents, social workers, and principals (rated higher in importance before the meeting) were ranked low in terms of their contributions.

Rank order correlations of individual participants' ratings of actual contributions and the mean rating received from others produced Spearman rho correlation coefficients of $>.99$, significant at .01.

These results suggest that educational planning committee participants may derive role sterotypes in terms of expected contributions and, for the most part, these expectations are valid in terms of actual contributions.

Special attention should be given to the planning committee process and participants' contributions. Careful study should be made of the process to determine if changes are needed to increase participation in the decision making process. Those responsible for leading the meeting should make every effort to encourage parents, principals, teachers, social workers, and others to share their knowledge about the child and the placement functions. Information to be presented should be reviewed by participants prior to the meeting so that less time is devoted to report reading and more time is allotted for discussion. This would provide for more informed participation by all members of the educational planning committee.

Gilliam, James E., Coleman, Margaret C. "Who Influences IEP Committee Decisions?" Exceptional Children.

Gilliam is Assistant Professor and Coleman is a doctoral student, Department of Special Education, The University of Texas, Austin.

The purpose of this study was to determine which IEP roles are perceived as: (a) most important to the IEP role, (b) most influential in decision making and (c) contributing the most to decisions reached.

Hypothesis: IEP committee members make differential contributions and are afforded different degrees of status.

The survey, conducted in three school districts in southeastern Michigan, included 130 participants at 27 IEP meetings (average attendance=5). Participants were surveyed tc determine the status ranking of the IEP roles and the influence and contributions of each role.

Data were obtained on a questionnaire completed in two phases. Phase 1, completed just prior to the meeting, required IEP participants to rank order the 15 roles most often represented in the meetings according to their importance or status in the IEP process (a rating of 1 was high and 15 low). Phase 2 was completed after the meeting and required IEP members to evaluate themselves and other participants on influence and contributions to five IEP functions: (1) diagnosis, (2) planning, (3) placement, (4) implementation, and (5) due process.

The variables of influence and contribution were rated separately by participants on each of the five functions on Likert-type scales. Rankings for each role on contribution and influence were then determined from mean ratings across all three districts.

The ten highest ranked roles included special education teachers, psychologists, parents, and regular education teachers. However, with the exception of the roles of special education teachers and psychologists, the premeeting and postmeeting rankings were quite dissimilar. The correlation between preconceived notions of importance and actual contributions was not significant (Spearman rho=.21). These results indicate that while participants expected certain roles to be important in the IEP process, their expectations were only marginally fulfilled by the persons in these roles. However, the rankings for contribution and influence were remarkably similar (Spearman rho= $>$.99, significant at .01).

Data indicated that for the four overall most highly ranked positions, the roles and expected functions were closely matched: The psychologist was perceived to have the most influence in diagnosis: the special education teacher, in planning and also implementation: the director, in placement: and the supervisor, in due process decisions. Parents were perceived as low in actual contribution and influence.

The current study indicates that not only does a hierarchy of influence among IEP committee members emerge, but also that

those roles attributed high status before the meetings were not necessarily those considered influential after the meetings.

To increase IEP committee members' knowledge of the child and the referral problem, an easily instituted change would be a concise but explicit data sharing form providing detailed information about the student's problem or progress in his or her current placement.

A second change would be the appointment of a case manager for each scheduled IEP meeting.

A final recommendation for improving the IEP process is to involve parents in the assessment and data gathering phase.

Implementation of these suggestions should foster greater participation by all members of the IEP committee and result in a true multidisciplinary forum.

Knoff, Howard M. "Investigating Disproportionate Influence and Status in Multidisciplinary Child Study Teams." Exceptional Children.

Knoff is Assistant Professor of School Psychology, Department of Educational Psychology and Statistics, State University of New York at Albany.

The purpose of this study was to measure school psychologists and special educators perceptions of Multidisciplinary Team members differential influence on special education decisions given the intent of P.L. 94-142 and in actual practice. Subjects also identified their preference for MT chairperson from the participating professions.

Hypothesis: disproportionate and unique patterns of influence yield significant difference in special education decisions.

Four independent samples were surveyed: 20 school psychology graduate trainees, 20 special education trainees, 20 school psychology practitioners, and 20 special education practitioners. Trainees were surveyed to determine the realism of graduate training programs and to predict trainees' interactions within the MTs when they enter the field. The graduate trainees were randomly chosen from five upstate New York university programs. The practitioners had advanced degrees in their respective professions and were randomly sampled from nine urban, suburban, and rural public school systems in the greater Syracuse, New York, area.

Subjects rated 11 MT professions on three separate 7-point Likert scales: one independently rating each profession's influence on special education placement decisions given P.L. 94-142's intent, one independently rating each profession's influence in the subject's actual experience, and one independently rating the desirability of each profession to chair the MT meeting. The Likert scales for the first two ratings ranged from 1 - Extremely Influential to 7 - Extremely Uninfluential, while the last rating ranged from 1 - Extremely Desirable to 7 - Extremely Undesirable.

An Analysis of Variance for balanced repeated measures (Profession: School Psychology vs. Special Educator X Status: Trainee vs. Practitioner X MT Profession X Decision: P.L. 94-142 vs. Actual Experience) was performed to assess team members' influence on placement decisions. The analysis revealed significant difference ($p < .05$) for the MT Profession factor, the Decision factor, and the MT Profession X Decision interaction. There were no significant differences between the Profession or Status factors, nor were there significant interactions.

A Tukey-a analysis performed on the MT Profession X Decision interaction revealed significant differences ($p < .05$) within the ratings. This analysis also revealed that the medical personnel, the parent of a handicapped child, the parent of the child under review, and the regular classroom teacher were all rated as less influential in actuality than they should have been given the intent of P.L. 94-142.

A second Analysis of Variance for balanced repeated measures (Profession: School Psychology vs. Special Educator X Status: Trainee vs. Practitioner X MT Profession) was performed assessing the desirability for different members to chair the MT meeting. The analysis revealed significant differences ($p < .05$) for the Profession factor, the MT Profession factor, and the Profession X MT Profession interaction.

A Tukey-a analysis performed on the Profession X MT Profession interaction revealed signficant differences ($p < .05$). This analysis revealed that both the parent of the child under review and the special education teacher were rated as more desirable chairpersons by the Special Education sample than by the School Psychology sample.

According to the sampled subjects, MT professions do exert disproportionate influence on placement decisions given both the intent of P.L. 94-142 and in the subject's actual experiences. Further, the patterns of disproportionality differ from previous research studies (e.g., Gilliam & Coleman, 1981). Therefore, each MT should be considered as unique, each with team specific interactions and patterns of professional influences.

Ultimately, an empirically based system of team processing should be developed so that MTs can become self-monitoring and responsible for their own team efficiency and productivity. Then we can be more assured of MT placement decisions that are truly child oriented and educationally motivated.

The preceding research indicates that parents are not active decision-makers in the child study team and the status of the regular classroom teachers participation in child study teams assume a passive role as team participants.

A review of studies addressed to this concern follows.

Goldstein, Sue, Turnbull, Ann P., "Strategies to Increase Parent Participation and IEP Conferences." Exceptional Children.

Goldstein is Director, Vance County Development Center, Henderson, North Carolina, and Turnbull is Acting Associate Director, Bureau of Child Research, University of Kansas, Lawrence.

The purpose of this study was to determine the effectiveness of two intervention strategies on parental contributions to the IEP conference.

Hypothesis: intervention strategies yield a significant increase of parental involvement in the IEP conference.

The involvement strategies were: (a) sending parents questions prior to the IEP conference with a follow-up telephone call; and (b) having the school counselor present as a parent advocate at the conference.

Forty-five parents of learning disabled children were chosen from five elementary schools in one local education agency to be observed at IEP conferences. The parents selected from each school were

divided randomly into three groups. The first group of 15 parents were sent questions before the conference concerning their goals for their child, the student's educational potential, and the development of an IEP. The second group of parents had the school guidance counselor present at each conference in the role of parent advocate. No intervention strategies were used with the 15 parents in the control group.

All parents in the study were observed at their child's IEP meeting by a researcher. Speakers at the conference were coded every 30 seconds according to 13 topics. By using the coding system, the frequency and topical area of parental contributions to the conference were discerned. All parents were given a questionnaire after the conference and a researcher telephoned each parent with a week after the conference to discuss this questionnaire. The Likert scale questionnaire probed the parents' perceptions of their participation in the conference and parental satisfaction with the conference and its product - the IEP.

The mean number of relevant contributions made by parents during the IEP meeting was larger for the two groups in which an intervention strategy was employed than for the control group. One-tailed t tests were computed between each group's mean number of contributions. There was no significant difference in parental involvement in the IEP conference between the parents in the control group and the parents who had been sent questions prior to the conference.

There was, however, significantly more parental involvement in the conference attended by a parent advocate than in the control group ($t=2.12$, 28 df, $p < .025$).

Analysis of the Likert scale questionnaire completed by each parent in the study found no statistical difference among the groups for either parental perception of participation or parental satisfaction.

The role of parent advocate assumed by counselors in this study did generate a greater degree of parental involvement in the IEP conference.

Although the group of parents who had received questions prior to the conference did not contribute significantly more to the IEP conference than the control group, a post hoc analysis indicated that a significantly larger proportion of fathers who had received questions attended conferences.

The results from the questionnaire indicated that all three groups of parents were satisfied with the conference and the IEP.

In summary, the two strategies used in this study are relatively easy to implement by local education agencies and have the potential of increasing the frequency of parental input and/or attendance by parents.

Trailor, Colette B., "Role Clarification and Participation in Child Study Teams." Exceptional Children.

Trailor is Director of Personnel Services, Norwich Public Schools, Connecticut.

The purpose of this study was to investigate the effects of role clarification on classroom teachers' participation in child study teams.

Hypothesis: role clarification significantly effects classroom teacher participation during team meetings.

Five child study teams were randomly selected from each of four experimental and four control schools for a total of 40 teams. Each team met Connecticut's statutory requirements of representation from instruction, administration, and pupil personnel. Trained observers coded the verbal behaviors of all team participants without the knowledge that the subjects of concern for this study were the 40 classroom teachers. Employing a systematic observational technique previously developed by Goldstein, Strickland, Turnbull, and Curry (1980), the coders recorded, at each 20-second interval the role of the speaker and the role addressed along one of 13 topics.

Prior to the observations, classroom teachers in the experimental schools participated in the development of 17 role statements for classroom teachers as team participants. Inservice sessions were held for all professional staff members in the experimental schools with emphasis on the classroom teachers' duties as team members.

Team chairpersons also participated in a separate session emphasizing their role as group facilitators.

The mean speaker score for classroom teachers in the experimental and control groups, each with an N of 20, was compared using a t test for the comparison of independent groups. The results yielded a t of 2.74 ($p < .01$). The experimental teachers spoke significantly more than any of the other participants in the team meetings. The participation of experimental teachers during the first and last five minutes of each m eeting was significantly more ($p < .05$) than the control teachers at both points. The extent to which classroom teachers and other participants in both groups spoke during team meetings is discussed in the study. A signficant difference ($p < .05$) was also obtained for school psychologists.

Role clarification activities have powerful effects on classroom teacher participation during team meetings. Classroom teachers who are aware of their team role share more information and become more involved in making program decisions than do other participants in team meetings. In contrast, classroom teachers without role information are far less active than psychologists and special education teachers during meetings.

In summary, research dealing with the team decision-making process in education and the involvement of members on such teams has yielded some unsettling observations.

Yoshida, Fenton, Maxwell and Kaufman (1978) examined the relationship among school staff role, participation, and satisfaction during Planning Team meetings which decide special education placements and programming. A strong positive relation was found between staff role and participation. School psychologists were ranked the highest on both varibles whereas regular education teachers were ranked lowest in participation and satisfaction. These findings were discussed in the context of interdisciplinary decision making and implementation of the placement team decision.

Gilliam (1979) examined which roles were perceived as contributing most to the decisions reached and the rank order of the personnel in terms of their importance to the educational committee process. Special education teachers and psychologists were ranked highest as contributing most to decisions reached and their importance to the educational process whereas principals and other administrators were lowest.

Gilliam and Coleman (1981) examined which IEP roles are perceived as most important and most influential in the decision making and which role contributed most to the decision reached. Special education teachers and psychologists were ranked as most important and influential in the decision making whereas parents and principals were ranked lowest.

Knoff (1983) surveyed school psychologists and special educators to investigate their perception of planning team members differential influence on special education placement decisions. In this group self-rating, school psychologists and special education teachers ranked highest in their perception of planning team members differential influence whereas regular classroom teachers and parents ranked lowest.

In conclusion, a very powerful set of role expectations, calling for more participation from school psychologists and special education teachers and less from regular education teachers and parents, appear to be operating.

Parental involvement in the education of handicapped children has been mandated with the passage of P.L. 94-142, The Education for All Handicapped Children Act. Goldstein and Turnbull (1982) conclude that the role of parent advocate assumed by counselors in this study did generate a greater degree of parental involvement in the IEP conference.

No specific mandate under P. L. 94-142 or its Regulations requires teachers as members of evaluation teams, except in cases of suspected learning disability. Rucker and Vautour (1978) posited that classroom teachers would participate in the team process if they were aware of their duties and responsibilities as team participants. (Trailor (1982).

Trailor concludes that classroom teachers who are aware of this team role share more information and become more involved in making program decisions than do other participants in team meetings. In contrast, classroom teachers without role information are far less active than psychologists and special education teachers during meetings.

Theoreticians have recently suggested that new directions for school psychological service and special education services are indicated in order to include a de-emphasis of the psychological-clinical model and focus on the educational process. The concern is that program specialists and educational planners will better meet the needs of exceptional children.

Assuming that the planning team model will operate for some time, further studies should investigate methods for increasing planning team member participation during planning team meetings as well as assessing the quality of decisions made by these committees.

Future implications for school psychologists re psychologists' participation on school-based teams, address the need to understand (a) the concepts underlying the theory of teams, (b) the nature of team decision-making processes, and (c) the reaction of team members to the team experience.

Obviously, teams should identify a set of concepts to guide their operation. Smith and DiBacco (1974) described a school-based planning team that included representation from nine areas of specialization.

The authors explain that "formal role definitions become less important than developing and using whatever competencies and skills are needed to implement problem solutions."

Research dealing with the nature of team decision-making processes described by Patton (1976) found that the individuals charged with making decisions were unable to function as a team: "Their decision-making and implementation skills have atrophied due to bureaucratization, and the minimal time devoted to these efforts during recent years." Further, Barbrach (1978) has also found that the usual manner of making decisions in schools is not interactive in any team sense, but is merely a perfunctory data-sharing activity. On such teams, one person makes the decision based on contributions from the other team members. The decision may or may not need further group scrutiny, modification, or approval.

Mixed reactions are reported in studies examining the degree of satisfaction expressed by participants on school planning teams. School psychologists are among team members who rate themselves high in participation and satisfaction: classroom teachers rate themselves low on both dimensions. Yoshida, Fenton, Maxwell, and Kaufman, (1978).

A related finding from a survey of interdisciplinary teams in community health centers (Bloom and Parad, 1976) suggested that of the four professional groups studied, the psychologists were the least impressed with the presumed advantages of interdisciplinary functioning.

Thus, the mandated team participation will require the acquisition of additional skills other than those now emphasized in some training programs, rather than simply a change in perspective. Similarly, since there are only a handful of empirical studies on teams (ERIC,1977), much of the current knowledge base is assumptive.

Well designed evaluation procedures can provide invaluable data during the ongoing development and implementation phases of team functioning. Applied psychologists working with school-based teams can make a significant contribution to that end.

# APPENDIX

# A

Author Michael Kabler specifies critical teacher data important to multidisciplinary evaluation teams. Ohio State University.

No specific mandate under Public Law 94-142 or its Regulations requires teachers as members of evaluation teams, except in cases of suspected learning disability. The need for teacher involvement is strong, however, teachers should participate in initial evaluation or re-evaluation. In multidisciplinary evaluation, the child's teacher has the best data on a full range of academic and social behaviors over time. This reservoir of information is useful when considering the appropriateness of data provided by other team members.

Participation of the child's teacher in multifactored evaluations assures a significant level of educational relevance to fulfill these four purposes:

1) diagnosis of the child's handicapping condition, if any, in a non-biased manner:

2) determination of the extent to which the child's individual educational needs are being met by his/her educational program:

3) delineation of the specific educational goals and instructional objectives for the child; and

4) determination of the least restrictive environment appropriate for delivery of the educational program.

Without teacher involvement, important data may be neglected since it is not easily available to other education team members.

The teachers' choice of evaluation procedures and their actions as a team member will determine which data appropriate for P. L. 94-142 purposes are obtained and reported. Suggestions for appropriate teacher participation are provided below.

Beyond the Traditional Evaluation Role:

In the past, teachers have acted as an informant for another evaluation team member or have administered standardized tests such as the Wide Range Achievement Test (Jastak & Jastak, 1978), And The Peabody Individual Achievement Test (Dunn & Markwardt, 1970). As an informant, the teacher provides information appropriate for the diagnostic purpose of the evaluation. However, this traditional role is inadequate; the most instructionally relevant information will be overlooked.

An appropriate evaluation by a multidisciplinary team must capitalize on the teacher's daily contact with the chil . Don't allow yourself to be limited to the traditional role.

Observational Techniques and Teacher Made Tests:

Contribute to the team evaluation of child through the systematic collection of observational data and teacher designed assessment instruments and procedures of specific academic and social skills. Such assessments can take place on a daily and

continuous basis in the classroom in conjunction with daily instruction. Use a variety of techniques for gathering data including:

- . criterion-referenced tests
- . direct observations
- . interviewing and simulating tasks

Through these approaches the teacher can accumulate relevant information about the child and make a unique contribution to the evaluation team.

Input from Parents:

Parents' information about their children frequently remains untapped. Other professionals have limited opportunity to obtain input from parents. Teachers should interview parents to collect data on motor, social, and academic-related behaviors. Performance levels may be compared between the home and school in this manner. Periodic input from parents assists with assessing the student's progress.

Input from Other Teachers:

Most children receive instruction from special teachers in art, music and physical education. This teacher data is rarely utilized by evaluation teams. Their data should be solicited by the child's primary teacher. Additional strengths and weaknesses can be identified in the student's performance for planning an instructional program.

An analysis of student performance in different settings on the same behaviors is also possible.

Question Educationally Irrelevant Data:

Supportive personnel will frequently report data about children which has no educational relevance. Teachers should question such data in an evaluation team report. If the data are needed for diagnostic purposes only, this should be made clear. If it has educational relevance, the evaluator should be questioned to assure the relevance is clearly stated.

Point Out Incongruencies:

Teacher data on the child's performance may be incongruent with data provided by other team members. Children's performance is different frequently from a classroom to a one-to-one testing session. Both data may be accurate but incongruent. One set of data may need to be given more weight than another depending on the purpose of the evaluation. Any observed incongruencies in the data should be pointed out to the evaluation team. The team can then determine the significance of the difference and arrive at a resolution.

# APPENDIX

# B

Assessment: Eleven Questions Parents Should Ask. Author: Randy E. Bennett.

Bennett is director of Special Education, Divisions of Educational Services and Elementary and Secondary School Programs, Educational Testing Services, Princeton, New Jersey.

1. What is the reason for referral?

The referral reason should be clearly stated in writing and the name of the initiator of the referral recorded. The referral statement should describe any events, child characteristics, or difficulties that have suggested the need for comprehensive individual evaluation and describe all actions taken (e.g., alternative instructional or behavior management strategies) to alleviate the difficulties mentioned.

2. What is the purpose of assessment?

Assessment can be conducted for a variety of purposes including service eligibility, diagnostic classification, program planning and placement, and program evaluation. The purpose of assessment, as stated by the child study team, should be logically consistent with the reason for referral. If the referral reason relates to a handicapped child's lack of progress, the purpose of assessment would likely be to gather information of use in evaluating the child's present individuzlized education program and in planning a new one.

3. To what extent am I, the parent, involved in the assessment process?

Besides being asked to consent to evaluation, parents should be asked to contribute information about their child's development, home behavior, medical history, and previous evaluations.

4. Is assessment conducted by a multidisciplinary team?

Good educational practice as well as federal law requires that a team of individuals representing a variety of disciplines be involved in special education assessment. The rationale for conducting assessment using a multidisciplinary team is two-fold. First, the use of a team helps prevent the opinions or short-comings of any one individual from dominating the assessment process. Second, the involvement of persons representing different disciplines (e.g., psychology, education, medicine) helps to ensure that the characteristics and problems of any given child will be looked at from a variety of perspectives. At a minimum, the multidisciplinary team should include a school or clinical psychologist and an educational specialist or special education teacher with expertise in the particular handicapping condition evidenced by the child. Other professionals, such as social workers, physicians, speech and physical therapists, and so forth, should be called in when needed.

5. Is the multidisciplinary team composed of trained and qualified personnel?

Members of the multidisciplinary team should be certified or licensed by a state or professional organization to conduct

individual diagnostic examinations. Those who do not possess such qualifications should be working under the close supervision of individuals who do. Beyond basic certification and licensure, individuals involved in assessment should be knowledgeable about how to select, administer, and interpret evaluation procedures and should be familiar with the nature, needs, culture, and language of the children they evaluate. Failure of team members to possess such knowledge can result in the provision of inaccurate data to decision makers.

6. Are assessment procedures selected in accordance with the purposes of assessment?

The types of data gathered and procedures used by team members frequently vary as a function of the purpose for assessment. Data required for decisions of service eligibility, for example, often include norm-referenced descriptions of the extent to which a child differs from his or her grade peers in some important academic or social skill area. Here, data describing the specific types of skills a child possesses are required (e.g., Gerry is able to name the letters of the alphabet.)

7. Are a combination of assessment procedures used?

All assessment procedures, whether they are tests, interviews, observations, or work samples (such as reviews of classwork) are flawed. No procedure gives perfectly accurate information about a child's abilities under all circumstances. Therefore, a combination of assessment procedures should always be used.

That a child needs special remediation instruction in math, for example, is a judgment that should never be made solely on the basis of test results. Rather, data should be gathered using a combination of methods including, for this case, reviews of classwork and observation of the child computing math examples, in addition to test results.

8. Are a variety of factors assessed?

A combination of methods should be used to assess the variety of factors relevant to the child's education. These factors should include developmental, social and educational history, home and school environment, home and school behavior, academic and nonacademic skills (e.g., vocational skills), and health and physical status.

9. Are procedures selected and administered to ensure that impaired sensory, motor, or communication skills do not interfere with the assessment of other skills and abilities?

Attempting to assess a reading-disabled child's math skills using a test containing extensive written directions would obviously provide an inaccurate and unfair indication of that child's mathematical abilities. Similarly inaccurate assessments may result from trying to determine the academic or intellectual skills of physically handicapped students using measures requiring printed, written, or other motoric responses.

10. Are procedures selected and administered in ways that are not racially or culturally discriminatory?

A number of requirements should be met in order for assessment to be considered fair and equitable. First, evidence should be present to indicate that evaluation was conducted by a team of individuals using more than one method to assess all factors related to the suspected handicap. Involving a number of individuals, methods and factors in assessment decreases the chance that the assessment process will be inappropriately affected by the biasing influence of any one individual, evaluation method, or child characteristic. Second, members of the assessment team should be familiar with the culture, language, problems, and needs of the minority group whose members they assess. Third, evaluation should be conducted in the preferred language of the child as well as in the language of the school if an accurate picture of child's functioning in both cultures is to be obtained. Finally, tests and other measures used should be examined to ensure that they were developed with input from minority representatives (most recent test manuals list, by name, minority consultants or members of review boards used), and that they are free of obvious indicators of bias (e.g., stereotypic presentations of minority individuals as unskilled workers or criminals).

11. Is assessment documented by means of a detailed written report?

At a minimum, the evaluation report should present identifying data (e.g., child's name, age, birthdate, address), the

referral reason and initiator, the purposes and dates of assessment, the full names of all procedures used, the names and roles of all participants, the factors assessed, and the assessment results, conclusions, and recommendations.

In conclusion, assessment is designed to aid school officials and parents in deciding if a child should receive special education (service eligibility); the type of handicap the child has (diagnostic classification); the appropriate program of goals, objectives, and instruction setting in which that program should be carried out (program planning and placement); and, finally, the extent to which these goals and objectives are achieved (program evaluation).

The central role of assessment in supplying the information needed to facilitate the provision of an appropriate education for handicapped children makes it crucial that parents be informed and knowledgeable about the evaluation process. The eleven questions and comments listed above are designed to help parents identify key aspects of that process so that they can more completely understand, monitor, and contribute to it.

# APPENDIX

C

Yoshida, Roland K., Fenton, Kathleen S., Maxwell, James P., Kaufman, Martin J. "Group Decision Making in the Planning Team Process: Myth or Reality?" Journal of School Psychology.

The following questionnaire of seven items asked Planning Team members to rate how much they participated during a Planning Team meeting and two items concerned their satisfaction with their presence on the Planning Team and with the Planning Team process itself:

A. Participation

1. I usually contribute information to PPT decision. (Contribute)
2. I frequently interpret information for the PPT. (Interpret)
3. I can comfortably disagree with statements made by other members during PPT meetings. (Disagree)
4. * I do not always feel free to participate as actively as I desire in the PPT decision making for a student. (Participate)
5. I usually propose alternatives. (Purpose)
6. I usually evaluate alternatives. (Evaluate)
7. I frequently participate in making decisions. (Finalize)

B. Satisfaction

1. I usually feel that my presence is necessary at the PPT meetings I attend.
   (Presence)
2. The team approach is effective in making program decisions for special education students
   (Team Approach)

* All participation and satisfaction items except participation item 4 were statements that the specified behavior was usually or frequently engaged in by PT members. It is inferred that agreement with these statements expresses a higher degree of perceived participation or satisfaction than does disagreement. For the present analysis, the response scale for item 4 was reversed to be consistent with the scales of the remaining items.

REFERENCE NOTE

REFERENCES

## REFERENCE NOTE

1. U. S. Public Law 94-142 (Education for All Handicapped Children Act of 1975).

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